

Dist of Portland Urban District

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Medical Officer's Report—

for 1855—

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Portland District Council.

Report of the Medical Officer of Health for the year 1895.

P O R T L A N D,

10th February 1896.

I have the honour to submit my report for the year 1895.

Meteorology

The weather was exceptionally severe during the early part of the year. The death-rate was unusually high in the first and second quarters, probably to some extent as a result of the severe winter and spring. The close of 1895 was characterised by mild damp weather, the rainfall in November being high, as is usual in this month. A note of the rainfall for the whole of the year is annexed:

January	....	3.39	inches
February	....	.02	,,
March	....	2.41	,,
April	....	2.20	,,
May	....	.32	,,
June	....	1.90	,,
July	....	3.17	,,
August	....	2.13	,,
September	....	.23	,,
October	....	3.11	,,
November	....	5.87	,,
December	....	3.11	,,

Total for the year 27.86 inches  
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This is slightly over the average fall which is about 25 inches

(For the figures given above I am indebted to the Rev. W. R.

Waugh, F.R.A.S. The Observatory, Portland.)

Population.

The population in the middle of 1895 was probably about 9,800 and this number we have taken for a basis for our calculations.

Births. The number of births registered during the year was as follows:-



January	17	} 61 in 1st quarter
February	22	
March	22	
April	15	} 45 in 2nd quarter
May	12	
June	18	
July	21	} 59 in 3rd quarter
August	24	
September	14	
October	22	} 56 in 4th quarter
November	21	
December	13	

Total for the year 221  
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Of the total number 121 were males and 100 were females.  
 This gives a birth-rate of 22.551 per 1,000 per annum.

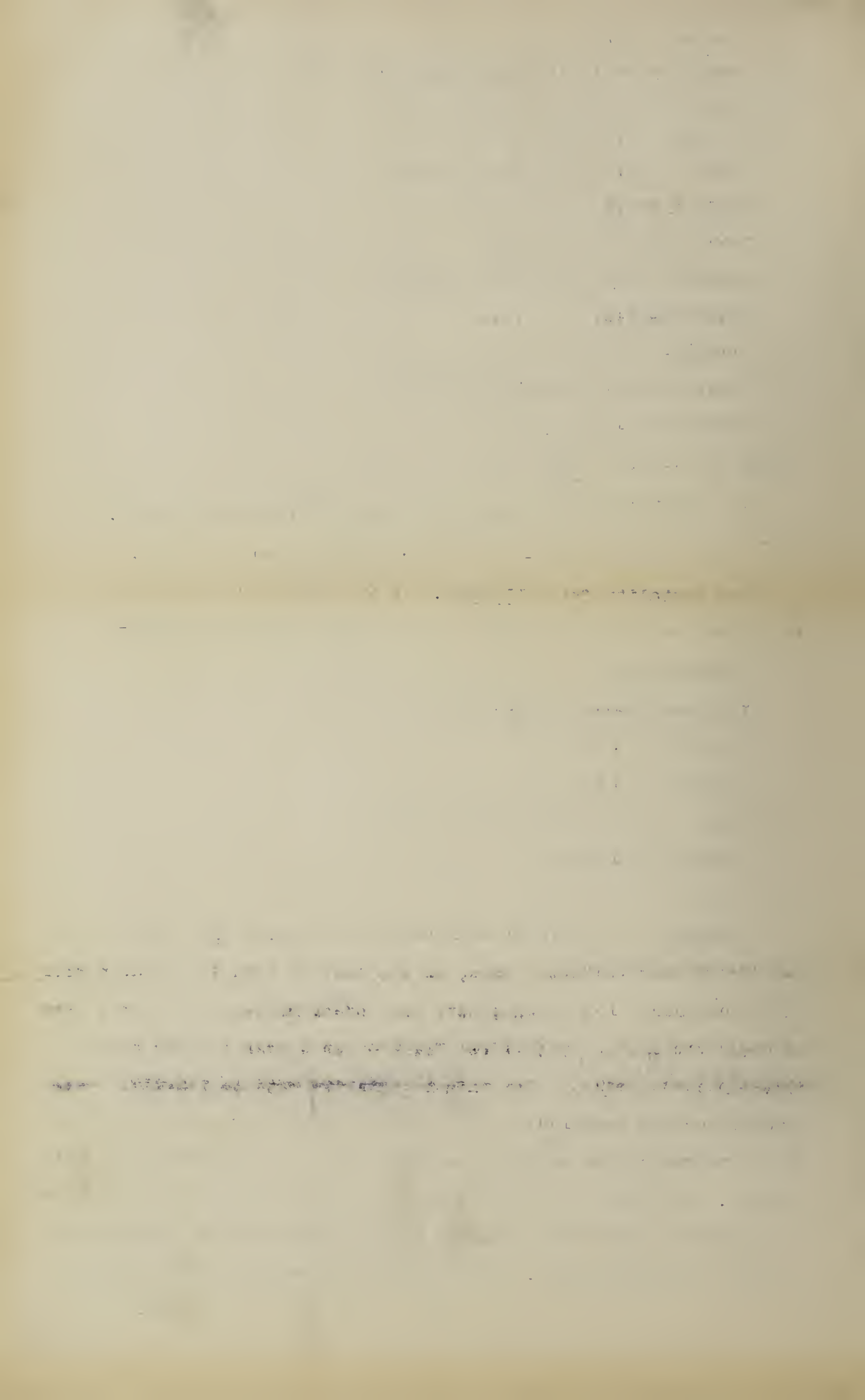
#### Deaths.

The following is a list of the deaths during the year:-

January	16	} 49 in 1st quarter
February	15	
March	18	
April	15	} 45 in 2nd quarter
May	12	
June	18	
July	9	} 27 in 3rd quarter
August	8	
September	10	
October	13	} 29 in 4th quarter
November	7	
December	9	

Total for the year 150  
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Fourteen deaths of non residents are to be deducted from this total. One death has to be added on, being that of a man who lived in Portland, who went to London to be operated on for cancer and died in hospital there. This leaves us a total of 137 deaths to





calculate the death-rate from. The death-rate will be found to be equal to 13.979 per 1,000 per annum.

The causes of death are shown in the next table.-

Scarlatina....	....	....	2
Enteric Fever.	....	....	7
Erysipelas....	....	....	1
Whooping cough.	....	....	3
Diarrhoea etc.	....	....	3
Phthisis ....	....	....	12
Bronchitis, Pneumonia etc.	....	....	30
Heart diseases	....	....	21
Injuries ....	....	....	4
All other diseases	....	....	<u>68</u>

Total, including London case referred to above..... 151.  
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The mortality from all causes at the different ages was as follows:-

Under 1 year	25
1 years & under 5 years	13
5 ,, " " 15 ,,	5
15 ,, " " 25 ,,,	26
25 ,, " " 65 ,,	52
65 years and upwards	<u>30</u>
Total	151

Deducting one <sup>non</sup>resident from those dying under one year old, we get twenty four deaths. This, in conjunction with the total number of births, enables us to calculate the infant mortality; by this term is meant the number of children dying under a year old for each thousand live births. The infant-mortality rate is 108.597. This is considerably below the infant mortality rate of England and Wales which is from 140 to 145.





### Zymotic Diseases.

The Zymotic death-rate is calculated from the total number of deaths caused by the following diseases, viz:- small-pox, measles, scarlet fever, <sup>diphtheria</sup>~~diphtheria~~, whooping cough, fever and diarrhoeas. We find that after deducting two cases of enteric fever which were imported into the island, we have remaining a total of 13 deaths from this class of diseases. This gives us a zymotic death-rate of 1.326 per 1,000 per annum. The zymotic death rate for England & Wales in the decennium 1881-90 was 2.34.

### Enteric Fever.

A number of cases of enteric fever occurred among the soldiers belonging to the King's Shropshire Light Infantry in January, the first soldier affected having been admitted to hospital on 27th Dec. 1894 as mentioned in last year's report. In all thirteen cases were admitted to the station hospital in January 1895. Five cases were seen among the civil population in the top-hill district during the same month. These cases were all in houses previously affected. Another case (in all probability imported, as the patient was taken ill within two days of his arrival in Portland) was first seen on 15th February, at Victoria Buildings, under hill district. This case terminated fatally on the 9th March. A special report on the presence of enteric fever was made to the Local Government Board on the 15th January. On the 26th August a case came under treatment at Prospect Place, and between that date and the 17th October seven cases in all were notified in the under-hill district. These were almost entirely confined to Sea View Terrace and Albert Terrace. One case appeared in Easton (top-hill district) in November. Seven deaths were registered from this disease, but two of them were imported cases.

Scarlatina. A considerable number of cases of scarlatina have been notified; twenty two cases are known to have occurred with two deaths. There is some reason to believe that several children have suffered from this disease without the fact having been notified



Erysipelas. No less than fifteen cases of erysipelas have come to our knowledge during the year, in various parts of the island.

One proved fatal and several were of a very severe type. About half the total number of cases were in the first four months of the year. One case, at least, was distinctly traceable to direct infection.

Mumps. An extensive epidemic of mumps broke out during the autumn months in the under-hill district. The vast majority of the cases were very mild, and had no medical attendance.

Whooping Cough. This has been very prevalent, especially in the top-hill district, for the last three months of the year. Three deaths have been registered from this disease.

#### Water Supply.

Since my last annual report was submitted the Southwell water scheme has been finally abandoned, owing to the analysis of the water showing such an excess of chlorine as to leave no room for doubt that water from the sea was percolating into the beds supplying water to the shaft! The Council were then placed in the unpleasant position of having to re-consider the whole question of water supply for the island. In this state of affairs a valuable and suggestive report was drawn up by Mr. Elford, the Councils' Surveyor, showing the probable cost of three alternative schemes, viz:- one to obtain the water from the Weymouth Water Co., another to sink a well in the valley below the Hardy Monument, near Portesham, and another to take advantage of the Portesham spring. He recommended either of the two last mentioned schemes as being preferable to the first on the ground of economy, the Portesham scheme being the best in this respect. On consideration, certain difficulties were found to stand in the way of all these schemes, and whilst the Council were considering what should be done in the matter, another scheme was unexpectedly brought to their notice. Captain Gould, an Estate owner at Upwey wrote to the Council offering to sink a shaft at





Upwey, at his own expense, and, should a sufficiency of water be found, to hand over the works and supply to the Portland District Council at a fixed price agreed upon beforehand. The Council are now considering this proposal and there is every hope that it will be accepted and that the scheme will prove a successful one. From the nature of the strata (chalk) where the proposed shaft is to be sunk, the character of the water is likely to be of great organic purity, and although it is certain to be a hard water, a large amount of the hardness will be a removeable hardness. Of course a careful analysis of the water will have to be made before a definite opinion can be expressed, and naturally the Council will protect themselves in regard to the quality of the water in any agreement which may be made. It would also be well to have a bacteriological as well as a chemical report upon the water before finally deciding to take it.

#### Drainage.

A proper system of drainage is still needed, and as soon as a water supply has been obtained, the question of drainage must claim the attention of the District Council.

#### Insanitary Houses.

The house at 31, Southwell, mentioned in last year's report has been closed as unfit for human habitation.

#### Nuisances.

A considerable number of nuisances have been reported to the Council during the year and most of them have been promptly abated.

Acts Adopted. The Infectious Diseases Notification Act 1889, and The Infectious Diseases Prevention Act of 1890 were adopted by the Council on 13th March 1895 and came into operation on the 1st of May.

The Public Health Amendment Act of 1890 and the Private Streets Works Act were adopted on the 24th July, and came into operation on the 1st September.

Recommendations. While the Council are to be congratulated on their adoption of the Acts for the notification and taking the best means for ensuring the prevention of infectious diseases, we wish to point





point out that in order to obtain the full effect of these acts, they must be rigidly enforced. Any breach of them which may come under our notice will be reported to the Council and should be promptly punished. In the body of this report notice has been taken of the fact that there is reason to suppose that some cases of scarlatina have not been notified. Sufficient evidence to secure conviction of the offending parties has not, so far, been obtained.

To get the full benefit of the various enactments for the prevention of infectious diseases it is desirable that better provision for hospital isolation of these case should be made. A striking example of the evil effects resulting from the home nursing of these cases occurred during the autumn. A young girl in service was taken ill with enteric fever and immediately removed to the house occupied by her uncle and aunt. Her aunt nursed her and after about a fortnight was taken ill of the same disease. The uncle followed a little later and the three cases were all under treatment at once. The aunt died, while the girl, the original source of infection recovered. Owing to the large number of labourers who have been recently employed on the Admiralty works etc. a great many lodgers have been added to the regular population, and there is reason to believe that overcrowding has sometimes resulted. This might be avoided without much difficulty, if the Council were to issue bye-laws with reference to houses let in lodgings. The Public Health Act of 1875 section 90 authorises them to do this, for the purpose of regulating the number of persons and separation of the sexes in a house or part of a house let in lodgings, or occupied by members of more than one family etc. It is often difficult to say exactly what constitutes overcrowding, so that the existence of byelaws specifying the exact amount of cubic space to be allowed as a minimum etc. would be of the greatest use.

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